

# COUNTY OF LOS ANGELES DEPARTMENT OF AUDITOR-CONTROLLER

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March 24, 2006

TO: Mayor Michael D. Antonovich

Supervisor Gloria Molina Supervisor Yvonne B. Burke Supervisor Zev Yaroslavsky Supervisor Don Knabe

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FROM: J. Tyler McCauley For

Auditor-Controller

SUBJECT: DUBNOFF CENTER FOR CHILD DEVELOPMENT CONTRACT

REVIEW- EARLY AND PERIODIC SCREENING, DIAGNOSTIC, AND

TREATMENT PROGRAM

We have completed a contract compliance review of Dubnoff Center for Child Development (Dubnoff or Agency), a Department of Mental Health Services (DMH) service provider. The A-C's Countywide Contract Monitoring Division conducted this review.

#### **Background**

DMH contracts with Dubnoff, a private, non-profit, community-based organization, which provides services to children and their parent(s) in Service Planning Area 2. Services include interviewing program participants, assessing their mental health needs, and developing and implementing a treatment plan.

Our review focused on the Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) program, which is Medi-Cal's comprehensive and preventive child health program for individuals under the age of 21. Dubnoff's EPSDT billable services include Targeted Case Management Services, Mental Health Services, and Medication Support Services. Dubnoff's headquarters is located in the Third District.

For our review period, DMH paid Dubnoff between \$1.77 and \$4.23 per minute of staff time (\$106.20 to \$253.80 per hour). For Fiscal Year 2005-06, DMH contracted with Dubnoff to provide approximately \$2 million in services.

# Purpose/Methodology

The purpose of the review was to determine whether Dubnoff provided the services outlined in their contract with the County. We also evaluated whether the Agency achieved planned service levels. Our monitoring visit included a review of a sample of Dubnoff's billings, participant charts, and personnel and payroll records. We also interviewed staff from Dubnoff and interviewed a sample of the participants' parents and guardians.

#### **Results of Review**

Overall, Dubnoff provides the services outlined in the County contract. The Agency used qualified staff to perform the services billed, and the participants' parents or legal guardians interviewed stated the program services met their expectations. Generally, Dubnoff maintained documentation to support the billings. However, for five (83%) of the six court dependent client files sampled, the Agency did not maintain a court authorization to prescribe and/or administer psychotropic medication, as required by the contract.

We have attached the details of our review, along with recommendations for corrective action.

#### **Review of Report**

We discussed the results of our review with Dubnoff on January 30, 2006. In their attached response, Dubnoff generally agreed with the results of our review and described their corrective actions to address the findings and recommendations contained in the report. We also contacted DMH to discuss Dubnoff's concern regarding our monitoring of Dubnoff's service levels. DMH agreed with the results of our review and planned to clarify the service level requirement in the County contract.

We thank Dubnoff management for their cooperation and assistance during this review. Please call me if you have any questions, or your staff may contact Don Chadwick at (626) 293-1102.

JTM:MMO:DC Attachment

c: David E. Janssen, Chief Administrative Officer
 Dr. Marvin J. Southard, Director, Department of Mental Health
 Sandra Sternig-Babcock, President & CEO, Dubnoff
 Public Information Office
 Audit Committee

# COUNTYWIDE CONTRACT MONITORING REVIEW EARLY AND PERIODIC SCREENING, DIAGNOSTIC, AND TREATMENT PROGRAM FISCAL YEAR 2004-2005 DUBNOFF CENTER FOR CHILD DEVELOPMENT

#### **BILLED SERVICES**

## **Objective**

Determine whether Dubnoff Center for Child Development (Dubnoff or Agency) provided the services billed in accordance with their contract with DMH.

#### **Verification**

We selected 5,369 minutes from 114,538 service minutes that Dubnoff billed the Department of Mental Health (DMH) for April and May 2005 and reviewed the progress notes and Client Plans maintained in the clients' charts. The 5,369 minutes represent services provided to 34 program participants as reported by the Agency. Although we started our review in October 2005, the most current billing information available from DMH's billing system was April and May 2005.

# **Results**

Generally, the Agency maintained documentation to support its billings. Every progress note reviewed documented what the individual or service staff attempted or accomplished towards clients' goals. For 212 (4%) of the 5,369 service minutes sampled, Dubnoff did not maintain documentation (in the program participants' case file) to support the billings. The undocumented billings totaled \$840.

In addition, the Agency did not sufficiently document 327 (6%) of the 5,369 service minutes sampled, in accordance with the County contract. Specifically, we noted the following:

- For 147 minutes sampled, the Agency billed for more than one staff present during an intervention, but the progress notes did not describe the specific contribution of each staff person and/or indicate the time spent by each staff.
- For 88 minutes sampled, the Agency billed for Mental Health Services provided in a group setting but the progress notes did not indicate the duration of the group session and the number of clients that participated in the group.
- For 92 minutes sampled, the Agency billed for Medication Support Services, but the progress note did not include the procedure code.

#### Court Authorization for Medication

For five (83%) of the six court dependent clients sampled, the Agency prescribed and/or administered psychotropic medication, but did not maintain court authorizations to administer medications, as required by the County contract.

#### Assessments and Client Plans

An Assessment is a diagnostic tool used to document the clinical evaluation of each client and establish the client's mental health treatment needs. A Client Plan establishes a goal(s) for treatment expected to address the issues identified in the Assessment. The client and parent/legal guardian must be included in the development of the Client Plan.

Generally, Dubnoff completed the Assessments in accordance with the County contract. Every Client Plan reviewed included observable and quantifiable goals. However, four (27%) of the 34 Client Plans were not signed by the client and/or parent/guardian indicating their participation in the development of the Client Plan. The County contract requires Agencies to obtain the client and parent/guardians' signatures on the Client Plan.

#### Recommendations

#### **Dubnoff management:**

- 1. Repay DMH \$840 for undocumented services.
- 2. Maintain sufficient documentation to support its compliance with contract requirements for the services billed to DMH.
- 3. Maintain court authorizations to prescribe and/or administer psychotropic medication to dependent wards of the Court.
- 4. Obtain the client and parent/guardians' signatures on the Client Plan.

#### **CLIENT VERIFICATION**

#### **Objectives**

Determine whether the program participants actually received the services that Dubnoff billed DMH.

#### Verification

We selected a sample of 10 program participants and interviewed their parents or guardians to confirm that the participants are clients of Dubnoff and that they received the services that the Agency billed DMH.

#### Results

The parents or guardians interviewed stated that the participants were clients of Dubnoff and they were satisfied with the services that the Agency provided to the children.

#### Recommendation

There are no recommendations for this section.

# **STAFFING LEVELS**

# **Objective**

Determine whether the Agency maintained the appropriate staffing ratios for Day Rehabilitation and Day Treatment programs.

#### **Results**

We did not perform test work in this area. The Agency does not provide Day Rehabilitation or Day Treatment services to its Early and Periodic Screening, Diagnostic, and Treatment clients.

# **STAFFING QUALIFICATIONS**

# **Objective**

Determine whether Dubnoff's treatment staff possessed the required qualifications to provide the services.

#### Verification

We reviewed the personnel files for 16 of 30 Dubnoff treatment staff and reviewed documentation to support their qualifications.

#### Results

Fifteen (94%) of the 16 staff sampled possessed the qualifications required to deliver the services billed. One staff, provided Targeted Case Management Services (TCMS) without a co-signer or two years experience delivering mental health services, as required by the contract.

#### Recommendation

5. Dubnoff management ensure that staff meet the minimum requirements to provide the services billed.

# **SERVICE LEVELS**

## **Objective**

Determine whether Dubnoff's reported service levels varied significantly from the service levels identified in the DMH contract.

#### **Verification**

We obtained a report of billings from DMH and compared it with the Agency's total contracted level of service identified in the contract for the same period.

# **Results**

Dubnoff's actual service levels did not significantly vary from its overall contracted service level of \$2 million. However, within specific service categories results varied. For example, the Agency provided \$178,000 (52%) less TCMS than contracted. During the same period, Dubnoff exceeded its contracted amount of Medication Support Services by \$118,000 (55%). The Agency did not receive written authorization from DMH to deviate from the services identified in their County contract.

### Recommendation

6. Dubnoff management obtain written authorization from DMH prior to deviating from contracted service levels.

# Attachment Page 1 of 2



Growing bright tomorrows for today's children

Dubnoff Center For Child Development

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March 14,2006

J. Tyler McCauley Los Angeles County Auditor-Controller 500 West Temple Street, Room 525 Los Angeles, CA 900

Dear Mr. McCauley,

We received the Auditor-Controller's Contract Compliance Review of Dubnoff Center's EPSDT program, and appreciate this opportunity to strengthen and improve the provision and management of these services to the community. Dubnoff Center is very pleased that your report found such low rates of missing documentation (4%), or insufficient documentation (6%) for services provided and billed. We are highly committed to providing the community with the best possible quality mental health programs, and we are extremely proud that every reviewed Client Plan was found to have observable and quantifiable goals, and that every reviewed Progress Note included an explanation of what had been attempted or accomplished in pursuit of those goals.

Dubnoff Center has already taken, or is in the process of taking, the following steps to correct the recommendations that were included in the report:

- Recommendation 1.: Dubnoff Center will repay DMH \$ 840.00 for reviewed services
  that lacked documentation, or submit correcting adjustments to DMH for those billed
  services. These billed services resulted from four factors:
  - Errors in the documented billed time (comparing the Service Logs and Billing Report with the corresponding Progress Notes) due to group services documentation that did not completely show the number of participants and length of time of services provided by each staff involved. The relevant Progress Notes forms have been revised, and appropriate staff are being retrained to fill in all necessary information. (Recommendation 2; Findings 4 and 5)
  - The form used to document Medication Support Services did not include the appropriate Procedure Code; this form has been revised to include it. Recommendation 2; Finding 6)
  - Medication Support Services involving more than one staff member were documented without specification of each-staff member's involvement and specific contribution to the client's mental health needs; appropriate staff members have been retrained, and increased monitoring of documentation is being provided. (Recommendation 2.; Finding 7)
  - Medication Support Services were provided and claimed, but documentation could not be located; increased monitoring of documentation has been implemented. (Recommendation 2.; Finding 8)

- Recommendation 3.: For five out of six court dependent clients who had received psychotropic medications during the reviewed service period, necessary court authorizations could not be located. The court authorizations had been obtained and filed correctly before and after the reviewed service period, but a significant procedural failure led to the agency's not obtaining or retaining these authorizations; new procedure for ensuring receipt and retention of necessary court authorizations has been implemented, using internal checks by three staff positions.
- Recommendation 4.: For four out of thirty-four Client Plans, either the client or the parent/guardian had not signed to indicate their participation in the development of the Plan. In some of these instances, the notation "parent not available" was written on the Plan, but reasons for this were not explained; appropriate staff members have been retrained, and increased monitoring of documentation is being provided.
- Recommendation 5.: In one instance, a service provider without the necessary mental health experience, and also lacking a co-signer, had provided and documented Targeted Case management Services; management has instituted additional controls to ensure that staff meet the minimum requirements to provide services.
- Recommendation 6.: The agency provided significantly less Targeted Case Management Services, and significantly more Medication Support Services, than its contracted amounts for these service categories, without having first obtained written authorization for these deviations from DMH. During the past month, DMH Deputy Director Susan Kerr has clarified that contracted amounts in negotiation packages are projections, and that deviations from them should not be cited by the Auditor-Controller; Dennis Murata from DMH clarified that DMH does not expect providers to request permission in writing for every deviation from the amounts projected in negotiation packages. Nevertheless, until told differently, Dubnoff Center will monitor billed services within each category, and overall, each month, and will request permission from DMH to deviate significantly from projected service levels.

The staff and management of Dubnoff Center appreciated the professionalism and openness of the Auditor-Controller's review team, and their willingness to communicate in detail to arrive at findings that support our providing the highest quality services to members of the community. We are also pleased to incorporate their recommendations in order to further that aspiration and commitment.

Monty Clouse, Ph.D.

coordinator of DMH Programs

Oluw Luu Helena Cerny, Ph.D., MFT/

Director of Clinical and Residential Services

budea Glerning Balecas

Sandra Sternig-Babcock, h.D.

President and CEO